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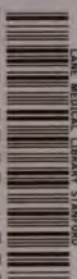
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FOREWORD.

THE only possible justification there can be for reprinting these letters is that perhaps a physician, traveling on foreign shores, may, from his professional habit of mind, see things there that would not present themselves to other eyes; and the writer's only desire is that perhaps the tale of what he saw may give some professional or lay brother as much pleasure to read as it does him

"Ricordarsi del tempo felice."

To the Editors of the *Boston Medical and Surgical Journal*, in which these letters first appeared, he wishes to express his cordial thanks for the permission of republication.

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THE MULTITUDINOUS SEA.

ON BOARD S.S. ZEELAND, 1 JULY, 1910,

Lat.: 41° 4' N. Long.: 47° W.

It might seem that the mid-Atlantic, especially the "roaring forties," were hardly an auspicious or opportune place for medical observation or improvement. Yet in point of fact, a physician can sit upon the deck of a deep-sea-going ship and view the works of creation with as much pleasure and profit as in his own office ashore. For not only does such a ship afford him nearly all the interesting objects of contemplation that he finds on land, but the ocean itself is as rich with appropriate and unfamiliar suggestion

"As is the ooze and bottom of the sea
With sunken wrack and sunless treasures."

First of all, there is the ever-present and pertinent subject of seasickness, or rather, ship-sickness, nausea, an ailment so ancient and honorable that it has a genuine Greek name, not a hybrid Latin one in *-itis*. Many speculations, popular and scientific, have been made as to the exact nature and cause of seasickness. It seems to affect chiefly women, "the kind of man called a clergyman," and others of a neuropathologic diathesis. It presents itself under several clinical types. First, there is the purely imaginary type, in which the patient, usually a robust chronic invalid with plenty of money, is perfectly sure in advance that she will be sick, takes to her bunk before the ship sails, has all the delicacies of the

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saloon brought to her stateroom by a sympathetic stewardess, and reappears, on landing-day, sleek, plump and rosy, with voluble comments on the horrible voyage. In such cases there is no remedy. Second, there is the bilious type, with headache and some nausea, chiefly affecting the soulful, dyspeptic curate, the fat old lady with gallstones, the thin, sallow co-ed, and other victims of chronic constipation. Here the remedy is obvious. A sub-variety under this group is characterized solely by occipital headache and seems probably due to unwonted eyestrain or ocular fatigue from glare, or possibly to the necessity of unaccustomed and continuous cerebellar co-ordination. The remedy in such cases is, of course, rest and suitable protection of the eyes. The third type is that due solely to excess at table, or in the smoking-room, usually affects men, is accompanied by profuse emesis, and proves self-limited unless a future attack is induced by repeated indulgence. In short, seasickness is not a definite disease, but a symptom-complex, more often central than peripheral in origin, and due to the concurrence of various disturbing factors, often operative separately on land without harm, but capable, when occurring together, of upsetting the gastric equilibrium of persons functionally predisposed to such instability. There are some people who are seasick under all conditions, and some who are never seasick under any conditions. For those who fall in the intermediate class, the chief precautions advisable seem to be discretion in diet, abundance of fresh air and exercise, free catharsis, and great temperance in the use of alcohol and tobacco, rules of hygiene which might well be made general. It is perhaps needless to add that the writer of the present lines has never yet been seasick.

Apart from such medical observations as the above, and other general diagnostic speculations in which a physician is prone to indulge even when contemplating his fellow-men socially, one is dependent for his direct professional converse and pabulum on the ship's doctor. The surgeon on this boat is a shrewd, genial young Irishman who has served in the army, too, and avers that there is no money in the profession on land or sea, but that, like the "tramp royal," and, indeed, like all of us for that matter, he "couldn't quit it if he tried." He took us over the ship with him on inspection, showed us the sanitary and culinary accommodations of the steerage, which are excellent, and finally his surgery, — "a poor thing, but mine own," he apologized needlessly, for the hospital, though small, was admirably equipped, and the instrument case contained almost all the heart could desire. Hopes for a possible appendectomy aboard, however, seem likely to be thwarted, for, as he says, "One is seldom really sick at sea." It is strange how quickly the normal professional reflexes recur; and though one leave shore heartily sick of patients and hospitals, in two days one is hungry for the smell of ether, and gravitates, with the usual clannishness of our kind, to the association of another physician. It is pleasant to walk and talk and smoke with the doctor on the forward deck after dinner, hear his tales of South Africa, learn his opinions of vaccine therapy and medical education, play chess with him, and listen to his comments on people and things in "The States" and elsewhere.

When the doctor is busy, and one is tired of observing one's fellow passengers, or has momentarily exhausted the interest, always keenest on shipboard, afforded by one's own physiology,

one can always revert for solace and occupation to the sea, the oldest, most inscrutable of natural objects, the primal origin and home of all forms of life. Aside from its literary, romantic and esthetic connotations, and its actual, ever-varying beauties of form and color, the ocean is a reservoir of limitless suggestion to speculation in the sciences. As one stands at the prow, watching the rack of clouds above, or the white scud at the parting of the waters beneath, the sun and the passing ships by day, the white sea-horses that rear their manes of flying foam to race alongside, the clustered brilliancy of the stars and the Milky Way at night, the marvel of man's knowledge and dominance becomes almost miraculous. That the high development and exquisite adaptation of his central nervous system have made possible this dominion over the beasts of the field, and the fowls of the air, and whatsoever passeth through the paths of the sea, seems the biologic conclusion. And one is tempted, from his position at the prow of life, to trace his being through known and unknown forms of animate existence, past his cousins that have remained, — the gull that sweeps and circles overhead, whose problems of aviation man has just begun to solve; the dolphins that dive and dash at the bow; the lazy squid that lolls its jelly-like mass and tentacular arms; the phosphorescent animalcules that make the waters glow alongside at night, — back to the ultimate ooze of the sea from which emerged the primordial animal cell. It makes the still marine cells of one's organism rejoice to be thus brought into closer kinship with the past along this perspective of their pelagic ancestry, and one's epidermis and respiratory epithelium are healed by restoration to the normal saline which pervades even the air at sea. Perhaps such speculations are fantastic.

Howbeit, they serve to show that wherever there is life, there is interest and opportunity for the physician, to whom even that which is not human is never alien, for his profession is the application of all knowledge to the problems of human living.

MEDICUS PEREGRINUS.

OBSTETRICS IN IRELAND.

DUBLIN, July 13, 1910.

THOUGH Ireland ought perhaps hardly to be called the home of obstetrics, it is surely a country where, in the hospitals at least, the science and the art of obstetrics are taught and practised in very classic and conservative form. This is due in part probably to the insular character of the local civilization in which changes, though intelligently made, come slowly and without disturbance of long-existing custom, and partly to certain well-marked racial physiologic characteristics of the people. It is a common saying in our own obstetric clinics in Boston that "the Lord loves the Irish," and in the matter of childbirth this seems to be true in the old country as well as in the new.

Our first experience of Irish obstetrics was in the city of Cork, at the Erinville Lying-In Hospital, a small but well-managed institution, conducted essentially on the principles of the Dublin Rotunda, and by a graduate of that hospital. The Erinville is pleasantly situated on one of the principal streets, and contains four public wards, "open day and night, free of charge, to respectable married women, without religious distinction, who must be recommended by a clergyman, doctor, or Lady Governess." It also has semi-private wards, in which patients pay twenty shillings a week, and a private room, not often occupied we were told, for which the weekly fee is three guineas. The building is old,

probably several hundred years, but shows, within and without, a capacity of adaptation to modern requirements which makes really good work possible even in an archaic environment. The principles of aseptic surgery and obstetrics are after all so very simple that understanding and conscience are the only essentials for their fulfillment; as in *Hamlet*, "the readiness is all."

During the year 1909, 385 patients were admitted to the Erinville Hospital, of whom 333 were delivered. In the externe department, 180 women were attended at their own homes. Among the 565 patients thus cared for, there were only two maternal deaths, one from advanced heart disease, one from secondary post-partum hemorrhage. The total infantile mortality was 19, 6 of these being macerated fetuses and 5 premature. Considering the life and surroundings of most of the patients, and the conditions under which much of the work must be done, these figures further illustrate the truth of the proposition that "the Lord loves the Irish."

In the hospital all the normal deliveries, which means a very large proportion, are conducted by the pupil nurses under the direction of the resident matron, who is a sort of combination of superintendent, head-nurse and house-officer, and an extremely capable woman. In the externe department, patients are attended by licensed midwives, graduates of the Dublin Rotunda or of the Erinville training-school, which receives yearly "a limited number of women to be trained as obstetric nurses and granted certificates when the medical staff are satisfied of their competency." As at the Rotunda, the term of study for such probationers is six months, "and the fee, including board, practice and instruction, £16." For nurses who

have previously had "a satisfactory hospital training," the term is only three months and the fee £10. To one accustomed to our American training-schools where nurses are paid, howbeit scantily, it seems as surprising that they should be thus charged a fee as it does to learn that the medical staff at the Rotunda, from the Master down, pay a really considerable sum for their appointments, though the mere possession of wealth without qualification will not secure such appointment. In the old world opportunity for instruction and experience is still difficult enough of attainment to be really valued by those who get it. As long as this remains true, nurses will doubtless continue to pay fees to the training-schools. Until it ceases to be true, however, or until financial and educational conditions are largely modified, it will be impossible in Ireland to require of obstetric nurses, as is done in our best schools, a previous general hospital training, followed by six months' obstetric pupillage, or, in the absence of such previous training, a fifteen months' course of obstetric instruction.

Medical students, the bane and *bête-noire* of our selfish American house-officers, — themselves barely out of studenthood, — are allowed to attend visits and demonstrations by the medical staff and occasionally to conduct deliveries, *interne* and *externe*. At Erinville they are nearly all members of Queen's College, Cork, now a national university. There is much less operative obstetrics for them to see than in American clinics, partly on account of our greater impatience and *fames operandi*, partly on account of the racial physiologic characteristic, already alluded to, which make normal labor much more often the rule in Ireland than the exception. At Erinville, as at the Rotunda, an expectant policy

is pursued; patients are allowed to go much longer unassisted in the second stage than is our custom; and the visiting staff are summoned only for complications or prolonged dystocia, with good results that would be impossible in a clinic of different social or mixed racial composition. Puerperal complications, too, are rare; tonsillitis, otitis media, phlebitis and mastitis seem practically not to occur; and a puerperal temperature over 100° almost invariably means and is treated as uterine infection. That these cases, also, are very infrequent is evidence of the efficiency of the nurses' work, and it is to the immense credit of Irish obstetrics that it has so practically taught the principles of asepsis as to obtain their successful application under the most disadvantageous conditions.

Not all the problems of obstetrics, however, are successfully solved in Ireland. As in all other countries, the mortality from puerperal sepsis, outside of hospitals and teaching clinics, still remains unduly high, and is even greater in Ireland than in England and Wales. This is because unlicensed midwives still practise in Ireland. There has been of late considerable agitation, medical and popular, over the proposed extension to Ireland of the provisions of the British Midwives' Act, which requires examination and registration of all midwives in England, and forbids unregistered midwives to practise. Late in June a conference was held of representatives of the Irish Medical Society, of the Royal Colleges in Ireland, of the Royal Irish Academy of Medicine and of various other professional bodies, who voted unanimously to support the demand for such extension. In a letter published in a recent issue of the *Medical Press and Circular*, Sir William J. Smyly, of Dublin, a former

Master of the Rotunda, strongly advocates this resolution, and in argument cites the fact that in England and Wales the death-rate from puerperal fever in private practice has steadily declined since a uniform Midwives' Act went into effect. He further points out the injustice now done the licensed midwives of Ireland, who not only have to compete with unregistered midwives in Ireland, but are not themselves allowed to practise in England. The remedy for this condition, he believes, is either the proposed extension of the British act to include Ireland, or a separate Irish Midwives' Act with standard requirements and reciprocity between the two countries. The problem of midwives is one that fortunately has not yet assumed serious importance in the United States, and probably is hardly likely to do so. Its present prominence here emphasizes an aspect of obstetrics with which we are happily but little familiar.

At Dublin, the center of obstetric interest is, of course, the Rotunda, but equally important and worthy of a visit are the Coombe Maternity and Sir Patrick Dun's hospital, which one cannot help wanting to associate somehow with Sir Patrick Spens. We were everywhere handsomely received, with fraternal professional cordiality and the graciousness of true Irish hospitality. It was rather interesting and surprising, by the way, to find the two Assistant Masters at the Rotunda one a Pennsylvanian, the other an orthodox Jew. It was also surprising to learn that the old gray weather-beaten round building from which the hospital derives its name, — and which one had always imagined as originally filled with patients' beds ranged around the wall and later perhaps used for lectures and demonstrations, — that this was never used obstetri-

cally at all, but was built by the governors as a hall to be let to the public for dances, concerts and other entertainments, to furnish revenue for the maintenance of the hospital. For many years the Rotunda was the scene of all the gayest functions of Dublin society, and though it has somewhat lost caste of late, it is still used and furnishes a valuable source of income. At present it is lavishly placarded with posters of a mammoth Hibernian Bazaar to be held there the latter part of July. Similarly, within a few years, the governors have erected in the spacious secluded gardens of the hospital a large covered skating-rink, which is let to a private company, who maintain it and charge the public a fee for admission which nets a profit both to the company and to the governors. The need of hospital economy and thrift is not unknown in America, but we are hardly yet accustomed to the idea of the trustees of our institutions running public amusements in hospital buildings as a business venture.

In Ireland, as on the European continent, there prevails and is accepted as a matter of course the theory that obstetrics and gynecology are but different aspects or departments of the same subject and should be taught and practised together and by the same persons. All the larger maternity hospitals have gynecologic wards to which are admitted not only patients with troubles consequent upon parturition, but women with pelvic disease of any sort. At the Rotunda, about five hundred such interne patients are treated annually, besides a large amount of minor, non-operative gynecology done in the externe department. The concept of the essential unity of obstetrics and gynecology is one that unhappily seems at present not yet fully established in America.

It is from the gynecologic surgery that the pathologist at the Rotunda derives the majority and the most interesting part of his material. Morbidity and mortality are rare in the obstetric wards. In the year 1908-09 there were but 4 maternal deaths among over 2,000 patients, and the pathologist was called upon to examine cultures from only 35 cases of suspected uterine infection, of which 15 proved negative. Autopsies are done on all fatal cases as a matter of course, there being no requirement of permission, as in our country, to hamper the pursuit of medical study. Another instance of the infrequency of puerperal complications is the fact that among over 2,000 patients last year there were but 7 cases of eclampsia, who all recovered, and only 2 of mastitis. The rarity of breast infection may be partly explained by the custom of letting all normal cases leave the hospital on the eighth day, but this cannot account for it altogether, and, like the rarity of eclampsia, it must be attributed in part at least to racial physiologic habit.

There is so much to see and to say about the Rotunda that it is impossible to tell it all here. It is an unfailing source of interest and pleasure and inspiration to go about the wards with the Master, to listen to his keen comment and trenchant criticism as he instructs his students, to watch him and his assistants at operation, to observe and compare points in which their method and technic differ from ours. The elements of asepsis are of course the same the world over, though it sometimes seems that the greater elaborateness of detail observed here must introduce possibilities of error which our simplicity avoids. In the operating-room the most striking single thing is that patients for pelvic laparotomies are placed in a combined Tren-

delenburg and lithotomy position, and the operator stands most of the time between the patient's legs, his assistant being on one hand, the operating nurse on the other. This method has at least one great advantage, that the surgeon can address his audience and demonstrate his work to their much better satisfaction. In the obstetric wards it is chiefly noticeable that forceps are applied and breeches delivered with the patient in the left Sims position, instead of on the back, procedures said to seem easy and natural to those who practise them, though appearing very awkward to us, and probably, like most details of technic, representing individual custom and habit rather than intrinsic difference of merit. The third stage is treated more conservatively and deliberately at the Rotunda than is often our practice, and the uterus is not nearly so strenuously controlled. Yet post-partum hemorrhage is not so frequent as in our clinics. Is this another instance of happy racial physiologic adaptation? "Did you have the first baby yourself, or did the doctor have to use instruments?" said the Master to a woman whom he was examining for contracted pelvis. "Sure, I had it meself," she rejoined, half indignantly, half humorously. "I'm Irish!"

Let it not appear, however, that there is nothing of medical interest in Ireland but obstetrics. The problem of pulmonary tuberculosis is one of the most important with which the profession has undertaken to deal, though, perhaps on account of climate, the racial susceptibility of the Irish to this disease does not seem to be so high here as it is in America. During the past ten years there has been in Ireland a great popular awakening to the nature of consumption and the possibility of its cure and prevention, largely

due to the extensive educational campaign instituted and carried out by Lady Aberdeen. The results of her work may be seen not only in the establishment of sanatoria for tuberculous patients, in the improvement of housing conditions among the poor, and in the conspicuous posting of notices forbidding promiscuous expectoration, but also in the general frequency with which one observes wide-open windows, particularly in the early morning while most people are still asleep. Though the ventilation of many hovels and cottages is still abominable, the fresh-air theory seems to have got a foothold, and in the daytime nearly every one lives outdoors anyway. In Dublin, two special tuberculosis nurses, maintained by the Women's National Health Association, spend their time among the poor, caring for those who have phthisis, and teaching others the principles of prophylaxis. Plans are also in progress for the erection in Dublin of a special Dispensary for the Prevention of Consumption. Notwithstanding such advances, however, much still remains to be done. At a recent quarterly meeting of the Dublin Hospital's Tuberculosis Committee it was unanimously resolved that, in the opinion of the committee, "a large proportion of chest affections leading to tubercular disease in the city of Dublin is due to the excessive amount of dust in the streets, the inadequate watering thereof, and the faulty method of street-sweeping." The committee further "notes with regret that the plague of dust is especially prevalent in the poorer quarters, where little or no attempt is made to lay it by watering and subsequent removal." As a matter of fact, the streets in Dublin, and in Ireland generally, do not seem a bit dirtier than many in our own Boston, though it is true that street-watering and sweeping are

not nearly as thorough as in our city. Cleanliness is no more an American than an Irish trait, and the ill-discipline of the average American makes him an all too frequent offender in the scattering of street-litter.

Another problem of medical interest, over which there seems to be considerable agitation in Ireland at present, is the question of compulsory vaccination. Apparently, in Great Britain, vaccination is optional, and parents who have a conscientious objection to it are not compelled to have their children inoculated. In Ireland, however, the law is absolute, and those who seek to evade it are punishable by fine. In a letter to the *Cork Examiner*, a correspondent, evidently an opponent of vaccination, eloquently describes "the terrible and ghastly dangers inseparable from vaccine blood-poisoning," and relates the case of "a child who was 'stone-blind' and yet, shameful to relate, the law demanded that in addition to the terrible affliction of blindness there should be imposed upon it the filthy, torturing disease of cowpox, a disease of such malignancy that many strong men have been slain by it." He further expresses the hope "that the people of Ireland will give their representatives in Parliament no peace until they at least stand on an equality with their English, Scotch and Welsh brethren in this matter; or, better still, not until every remnant of this obnoxious compulsory vaccination law is swept from the statute book." Apart from differences of opinion as to the advisability of compulsory vaccination or as to the lethal "malignancy" of cow-pox, this letter is a straw that shows which way the wind of public opinion is blowing. It must be admitted that there is some justice in the correspondent's plea for equality, and it must be remembered that

doubtless vaccination has been brought into popular disrepute in Ireland, as among some persons in America, partly through the improper practice of it by certain physicians whose intentions have been better than their asepsis.

In this connection it is interesting to compare some statistics recently published in the annual report of the Metropolitan Asylums Board for 1909, giving the mortality from smallpox in London since 1838. In that year there were 3,817 deaths from the disease among a population of 1,800,000, a rate of 2,120 per million. The death-rate then declined steadily till 1871, when, in conjunction with an epidemic, it rose to 2,422 per million. Since then it declined more rapidly, and in the years 1906, 1907 and 1908 there was actually not a single death from smallpox in the city of London, with a population nearly three times as great as in 1838. In 1909 there were 2 deaths from smallpox in London, and in the first three months of 1910 only 8 have occurred in the whole of England and Wales. Ingeniously enough, the opponents of compulsory vaccination undertake to explain this decreasing mortality by the increase of conscientious objection to vaccination, and point out, in support of their contention, that in the three years in which there were no smallpox deaths in London, the percentages of exemption for such objection were respectively 5.6, 6.2 and 17.2. In commenting on this absurd reasoning, the *Medical Press and Circular* appropriately remarks: "The *suggestio falsi* and *suppressio veri* involved in this line of argument is grotesquely apparent, and shows to what depths of intellectual squalor the anti-vaccinationists must have fallen." In an address before the Conference on Tuberculosis recently held in Edinburgh in conjunction with the annual

meeting of the National Association for the Prevention of Consumption, Dr. Osler also took occasion to refer to the pernicious activity of anti-vaccinationists. He is reported to have said that in the event of a severe epidemic of smallpox he should like to issue them a challenge for the simultaneous exposure, in the care of the sick, of ten selected vaccinated persons and ten selected unvaccinated persons, — the latter preferably members of Parliament and anti-vaccination doctors and propagandists, — with the promise “neither to jeer nor to gibe when they caught the disease, but to look after them as brothers, and for the four or five who would be certain to die, to arrange a funeral with all the pomp and ceremony of an anti-vaccination demonstration.” If the humor of this suggestion be half American, it serves to illustrate the better that other English-speaking countries are no freer than we from the lets and hindrances that impede the progress of medical service to the community, and makes us more appreciative of our professional good fortune in some respects at home by comparison with the troubles of others abroad.

MEDICUS PEREGRINUS.

LICHFIELD AND ITS TRADITIONS.

LICHFIELD, July 16, 1910.

WHEN Johnson said of the inhabitants of Lichfield that they were "the most sober, decent people in England, the genteeldest in proportion to their wealth, and spoke the purest English," he was not far amiss, though one is tempted to believe that his remark was prompted more by local pride than by unbiassed judgment. For to-day the people of Lichfield seem particularly thrifty, intelligent, and contented, and their speech more like our own than one finds even in London or in many of the peripheral counties.

The town itself is situated in the pleasant valley of the "smug and silver Trent," in the broad, fertile, inland district that has been called the heart of England. Architecturally, it is dominated by the cathedral, whose three beautiful spires, "the three ladies of the vale," are mirrored in the unrippled surface of the minster pool, and whose row of stately old lindens shades the dean's walk and fills the close with the perfume of their blossoms. Historically the interest of Lichfield centers about Samuel Johnson, to whose birthplace all the street-signs point. The house, now in perpetual care, is open to the public and contains many memorabilia of the great lexicographer. From the windows of the birth-room, or of the shop below, in which Samuel's father Michael sold books, one can look out on the cobble-paved market place at the statue of Dr. Samuel and beyond at that of his conceited,

official biographer, Boswell. It is interesting to conjecture whether Johnson ever dreamed, when as a barefoot boy in that market place he was hooted at by his fellows for his ungainliness, that some day he should lie in Westminster Abbey, while his monument and home in his native town should be a visiting-place for scores of literary pilgrims.

"Seven cities fought for Homer dead,
Through which the living Homer begg'd his bread."

Apart from Johnson and the minster, however, Lichfield is not devoid of other interests. Here for many years, in a house hard by the cathedral, lived Erasmus Darwin, doctor of medicine, grandfather of Charles Darwin, who perhaps did more than any other man in his century to modify the scientific and religious thought of the future. Here, too, as dean of the cathedral, lived and died Launcelot Addison, father of the famous essayist. There is a tablet in the cathedral to Dean Launcelot and the more illustrious Joseph, and on the opposite side of the nave one to that "amiable, virtuous and distinguished" personage, — though perhaps readers of Pope would incline to dissent from the appropriateness of the adjectives, — Lady Mary Wortley Montagu, "who happily introduced from Turkey into this Country the Salutary Art of inoculating the Small-Pox. Convinced of its Efficacy she first tried it with Success on her own Children, and then recommended the Practise of it to her fellow-Citizens. Thus by her Example and Advice we have softened the Virulence and escaped the danger of this Malignant Disease." Whatever the virtues or failings of Lady Mary, and whether or no she "robb'd the whole tree" of knowledge, she surely applied some of its fruits for the benefit

of mankind; and in these days of anti-vaccination agitation it is pleasant, though perhaps mortifying, to find that these benefits were appreciated by an age that had not yet outgrown the vivid terror of epidemic smallpox.

Medically, Lichfield to-day seems well provided for in proportion to its population of approximately 10,000. Near the center of the town is the Victoria Nursing Home, a hospital of fourteen beds for both medical (non-contagious) and surgical cases, with a daily out-patient clinic, and provision for receiving and treating accidents or emergencies at any time. It is administered by a lady superintendent, under the direction of a visiting staff of local physicians and surgeons. There are also an infirmary for incurables and a small maternity home, all open free to the poor. The term "home," or "infirmary," is used here apparently in distinction from the word "hospital," which means really an almshouse, like the celebrated Leicester Hospital at Warwick, where the aged and indigent are cared for upon a public foundation. There are two such hospitals in Lichfield, at opposite ends of the town, both of ancient establishment and endowment, one for "thirteen old poor men," the other for fifteen women. For some reason which does not appear, the former building is about twice the size of the latter, a fact which might be cited by the suffragettes as an ancient example of unjust sex discrimination.

To the east of Lichfield, by Stowe pool, stands the very old parish church of St. Chad, the patron saint of the town, who first brought Christianity among the inhabitants of this region. Near this church is St. Chad's well, now roofed over by a stone hut, and shown with great reverence as the spot where the good saint baptized the first

Christians. Its waters are still and deep, but thick with green scum, and close to the church-yard,

“Where heaves the turf in many a mouldering heap,”

and the poor old woman who ran out with a dirty tumbler from the hut across the lane could not understand how we could refuse to taste the draught which she proffered and derive the benefit of its sacred properties. However, two-pence consoled her, and she went back voluble in praise of the well, and probably happy, if not fortunate, in her ignorance of the bacillus of Eberth and of the reeking bacteria of decomposition. We preferred to walk home through hedge-bordered lanes across the meadows, and watch the swan sailing above her reflection in the pool, and listen to the minster bells chiming out of the gathering dusk, and smell again the faint perfume that lingered on the evening air till twilight slowly darkened into night.

MEDICUS PEREGRINUS.

LONDON AND ITS HOSPITALS.

LONDON, July 28, 1910.

Voici le centre du monde! one surely feels inclined to exclaim on entering this great, gray, ancient metropolis, the symbol and incarnation of a world-wide dominion. Nor would such an expression be far amiss. Other cities are doubtless more magnificent than London. Paris dazzles one with the white and gold of its imperial splendor; New York stuns with its sheer economic and architectural mass; Edinburgh captivates with its romantic beauty; but London dominates with its immense and immemorial significance. Not only is it inconceivably vast,—nearly twenty miles long now,—the only city beyond whose confines one cannot see from a high vantage-point at the center; not only does it present the sign and evidence of colossal wealth and vested power; but it represents—from the Tower that still stands guard at the east to the hoary pile of the Parliament buildings that crown the waters of the river at Westminster—the center and hearth-stone of all the heritage and tradition of our great English-speaking race, whose children turn back from every quarter of the globe to

“The hush of the Abbey that makes us We.”

If England be still

“Model to her inward greatness,
Like little body with a mighty heart,”

London is surely that heart, and “out of the heart are the issues of life.” Indeed, it is this humanly and racially representative character

which makes London great in spite of its size, which saves it from becoming a mere sordid bulk, which makes it, for one New Englander at least, the most homelike city in Old England.

There is so much to see and to do in London that one might spend a lifetime here and know as little of it as we easterners in America do of the great west of our own country. London has boroughs by the dozen, churches and theaters by the score, hospitals and railroad stations by the hundred, streets and houses by the thousand, and inhabitants by the million. In its profusion one can only gather a bit here and there, see something, ponder much and remain in reverent stupefaction at the last.

Our first medical experience in London was a visit to one of its old hospitals, recently rehoused in new and splendid buildings in connection with the University College Medical School. The intimacy of relation between school and hospital is as noteworthy here as in Ireland, an ideal towards which we in America are working but as yet have by no means fully attained. Five years of medical study are required in all the London schools, of which the first two are spent in laboratory, the remainder in clinical work. Following this, ambitious men who can afford it take a further service as residents, corresponding to our house officers, in the hospitals, for terms varying from six months to two years. In London these positions are unpaid, but in many of the county hospitals, as we learned, small salaries are offered to attract good men. The complaint of young doctors is everywhere the same: "Practice is rotten and living is high." "A fellow can't afford to marry here, don't you know," said one London surgeon, not so young or unsuccessful a man either.

Other hospitals that we visited in London showed much that was interesting, little that was startlingly novel. A striking thing in all was the importance attached and the attention paid to pathology. Restrictions on autopsies are not nearly so stringent as with us, and a full *post-mortem* examination is made as a routine on every case dying in hospital unless objection is lodged by the patient's relatives within a few hours after his death. The obtainment of written and witnessed consent is unnecessary and never troubles the souls of pathologists or superintendents. Moreover, governing boards show an intelligent appreciation of the value of pathologic research and appropriate liberal funds for the equipment and maintenance of laboratories. The result is not only that there is a large amount of pathologic material, but that extensive use is made of it, and every hospital of any size has a museum of considerable extent and value.

Clinically, English methods and technic do not differ widely from our own. London obstetrics as we saw it at the large lying-in-hospitals is even more like our own than that of Dublin. In the treatment of contracted pelvis, pubiotomy, so much in favor at present at the Rotunda and on the continent, is disapproved by the majority of London obstetricians, who seem to be divided into two camps, one preferring Cæsarean section, the other induction of labor at the thirty-fifth week for all cases on the borderline of possibility. Surgery differs little from that in our own country. There seems to be a widespread distrust of catgut for fear of tetanus and other infections, so that silk is much more extensively used than is now the custom with us. Moreover, simple boiling is not considered sufficient for its sterilization, but it is also steeped many hours in carbolic

acid and used impregnated from a carbolic solution.

The great medical event of our stay in London has been the annual meeting of the British Medical Association, held in the buildings of the Imperial Institute at Kensington. To visit this immense pile, of great architectural beauty and magnificence and covering many blocks with its allied museums and schools, is in itself a bewildering and impressive revelation. And the special exhibitions, of specimens, instruments, books, drugs, foods, electrical apparatus and appliances of all sorts, arrayed there for this occasion, were enough to have occupied many hours with pleasure and profit. Where life is too rich one sometimes gets less out of it than when its possibilities are limited and its issues more clearly defined.

Apart from the general and representative meetings of the association, there were twenty-one sections, covering the whole field of scientific and practical medicine, among which it was almost as hopeless to choose as among the riches of Midas. The JOURNAL will of course have a full official account of the proceedings, which must relieve your correspondent of the duty of reporting them. Decidedly the most interesting of the few sessions we could attend was that of the section in surgery, under the presidency of Sir Victor Horsley, which considered the operative treatment of simple fractures. The discussion was opened by Mr. Arbuthnot Lane, who advocated, as he has done for some years, early, fearless operation, under the most rigorous asepsis, on cases of simple fracture in which perfect reposition of the fragments, as tested by the x-ray, cannot be readily obtained by the usual manipulative measures and maintained by splints. He believes that our standards of satisfactory

anatomic and functional result should be much higher than they are, and that our functional results after fracture will become perfect only when anatomic results are perfect. In all cases, after incision and correction of displacement, he secures fragments in position by means of steel plates and screws, which are left to heal permanently in place, except in epiphyseal separations, when they are subsequently removed for fear of interference with growth. Wire he has abandoned as not affording sufficiently secure fixation. Mr. Lane showed a large series of beautiful x-ray plates, which were an admirable illustration of his results and strong argument in favor of his method, as were also his cases to be seen at Guy's Hospital and Great Ormond Street. There was much further discussion, in which men of eminence in England and from the continent took part, and although some opposed Mr. Lane's contention in whole or in part, the majority favored his conclusion, though recommending great discretion in the selection of cases and, as some one happily added, of the operator.

Apart from medical meetings, visits to hospitals and operating clinics, which have claimed most of our time, there have been few objects of special interest. We have read some headlines about the terrific heat-wave in the States, while we were shivering in the rain with the thermometer at 50°, and about the Crippen murder, whose horrid details have doubtless been served up with the usual disgusting minuteness in America. It is gratifying to find that "Dr." Crippen is not here considered in any sense a representative of the American profession.

Just at present there is some excitement over a recent outbreak of foot-and-mouth disease near Ripon in Yorkshire. Parliament, already dis-

tracted by the suffragettes (of whom, by the way, we have seen and heard not a few), by the income tax, by free trade and protection, and by the oath of accession, has had to turn its attention to this episode also, and has ordered a large number of cattle in the infected region killed, and others isolated to prevent extension of the disease. The department of agriculture of Ireland has also forbidden the importation of cattle and sheep from Great Britain into Ireland. Twenty-seven years ago, when the disease first broke out in England, thousands of cattle died of it or were killed in the effort to stamp it out, and the loss and expense of this epizootic were estimated at over \$12,000,000. There have been since two small outbreaks, one in Kent in 1902, and one in Edinburgh in 1908, both of relatively slight extent and destructiveness. It is hoped that the rigorous measures now adopted will soon check the present eruption of the disease. A new form of parasitic mange has also been reported among horses in East Suffolk, and steps are being taken to prevent its further spread.

But though there are parasites a plenty for man and beast, the vegetation of these blessed islands seems entirely free from them. There are no gipsy moths, browntails, leopard-moths, elm-leaf beetles, army worms, or any of the thousand and one scourges that afflict our trees like the hosts of the Philistines. Here everything flourishes like the green bay of Scripture, even in the city, from the great elms to the ubiquitous ivy and the grass and flowers that sprout without visible sustenance from roofs and walltops. The flora imbibes moisture perpetually from the continuously oozing atmosphere, and grows so vigorous in consequence that no worm can afflict it. For the same atmospheric reason there is no

dust in the streets, and, singularly enough, there are no mosquitoes. We have seen only three house-flies since landing.

In connection with the meeting of the British Medical Association, there has been a curious resurrection of that apparently unlayable medical ghost, the question whether or no Napoleon died really of cancer of the stomach. Whether the fact were pathologically proved or not, it might seem sufficient that the great Corsican has been satisfactorily dead for nearly eighty years and that even his memory has ceased to trouble the peace of Europe. But some one has recently unearthed in the Museum of the Royal College of Surgeons two specimens purporting to be secondary carcinomatous growths from the emperor's intestine. Microscopic examination of these, however, now shows them to present merely "enlarged lymph follicles, containing extravasated blood," and upon this discovery is based the surprising contention that Napoleon did not die of cancer. Aside from question as to the value or interpretation of this evidence, there seems as little profit in further discussion of the matter as in the query whether Cæsar and St. Paul were epileptics or Joan of Arc a paranoiac. Peace to their dust. We shall all soon be as dead as they, and in spite of their afflictions they managed to become a deal more famous than most of us will ever be, who make question about them.

After all, the greatness of London, in retrospect, seems to consist less in what it is than in what it represents. In itself, the city is

"All valiant dust that builds on dust,"

but that dust is the dust of Nelson and Wellington and Cromwell and Gladstone and hundreds

of their mighty peers. And out of that dust goes forth an inspiration of power to those who derive the English blood and speak the English tongue, from Labrador to Australia, from Gibraltar to the Golden Gate.

MEDICUS PEREGRINUS.

PILGRIMS OF CANTERBURY.

DOVER, July 31, 1910.

We did not, like Chaucer, lie "in Southwerk at the Tabard," but when we finally did turn our backs on London we were

"Redy to wenden on our pilgrymage,
To Caunterbury with ful devout corage."

Unlike his good pilgrims, however, we broke our journey only at Rochester, a pleasant town with a fine old Norman castle and a cathedral that shows many traces of the ruthless hand of ignorance. A nearly effaced tablet near the West Gate still preserves, notwithstanding, the pious memory of one godly "decani Roffensis" and with it of the Roff's camp of the Romans, which, through the Anglo-Saxon Hrofesceastre, gave the town its present name.

From Rochester we passed by far easier stages than the olden palmers to Canterbury, a much smaller town of much greater ecclesiastical importance, likewise with a name of pleasant etymologic connotation, Cantwarabyrig, city of Kentish men. The modern Canterbury, like that of old time, is still a straggling town built in a narrow strip along a highroad that runs at right angles to the river Stour. The cathedral dominates it splendidly, standing in stately magnificence in its grand old close, surrounded, as Hawthorne has said of Peterborough, "by ancient and comely habitations of Christian men." It is a dramatic story they tell of the murder of Becket in this old minster, and a story that after

seven centuries still seems vividly fresh as you retrace step by step the course of the martyred archbishop that fateful night, from his entrance into the cloisters, where the lurking knights glimpsed the glint of his ecclesiastical vestments, to the very stone in the great transept where they overtook and slew him. Something of the gloom of that tragedy seems ever since to have shadowed the church, whose castellated stone screen and successive flights of steps add an air of forbidding sternness to the interior. Faith finds it hard to credit the accounts of the fabulous wealth later heaped up by devout pilgrims at the shrine of St. Thomas, "the hooly blisful martir," but it was evidently great enough to tempt the cupidity of Henry VIII, who thereby profited most unrighteously by his ancestor's crime.

Were it only for its cathedral, Canterbury would still attract pilgrims to-day, but the town is replete with interest apart from that. In the first place, its houses are the quaintest and oldest, and its streets and lanes the narrowest and crookedest, one can find anywhere within equal distance of London. They still show you an old hostelry, on the corner of Mercery Lane, where pilgrims to the cathedral lodged in Chaucer's time; and outside the West Gate another tavern, built in 1403, is still standing, where Sir John Oldcastle, prototype of Falstaff, is reputed to have consumed an intolerable deal of sack. Mercery Lane and Butchery Lane both lead into the Butter Market, where there is a dainty little bronze figure representing the muse of Christopher Marlowe. Christopher was a native of Canterbury, and died at twenty-nine, not the least famous of the men who have distinguished the old town.

Then, too, Canterbury has a multitude of old churches, from St. Dunstan's,—where Henry II doffed his royal robes and whence he went on his knees to the cathedral to do penance for Becket's murder,—to St. Martin's, the mother church of England, built in 680 A.D., and communing still by itself among its yews on a hill apart from and overlooking the town. Then there is the colony of French Huguenot silk-weavers, who came to Canterbury as refugees, and since 1576 have exercised the privilege, granted them by good Queen Bess, of maintaining their French church and services in the crypt of the cathedral. Their descendants still continue their weaving trade in a moss-grown old building overhanging the river and bearing in one gable the laudable motto,

“ Fair Warp and Fitting Woof
Weave a Web that Bideth Proof.”

The river Stour runs with affectionate intimacy in and through the town, under old bridges, past garden walls whose luxuriant flowers trail in its waters, under creaking mills whose wheels it still obligingly turns. If there were a pagan tutelary deity of Canterbury, it ought to be the river-god of the Stour. And finally some confluent join it and it broadens out and babbles away serenely through hop-fields and sunny meadows. There is pleasant driving everywhere about Canterbury. One day we went to Harbledown, the last station of Chaucer's pilgrims before they reached their goal. The village must look exactly as it did in his time, and there is still the church of an old Hospital of St. Nicholas, founded by Archbishop Lanfranc for lepers, and now an almshouse for old poor men.

Canterbury also possesses another hospital, the

Kent and Canterbury Hospital, a genuine medical institution, founded in 1793, and built to accommodate 104 patients, half medical, half surgical, though it now seldom has more than 80, owing to the establishment of hospitals in other larger and more rapidly growing cities of the country. It has roomy, comfortable wards, a large, modernly equipped operating room, and a pathologic laboratory far surpassing in size and convenience that of several hospitals in Boston. An out-patient department is maintained, and there are two residents, a physician and a surgeon. The latter most courteously showed us about. Among other things of professional interest, we saw a case of extreme microcephalus in a baby two weeks old, and another baby of three weeks with a large lumbar spina bifida, hydrocephalus and a deficiency of cranial bone such that the anterior and posterior fontanelles were merged into one, and practically the entire top of the cranial vault was membranous. This baby also had bilateral extreme talipes valgus.

The spacious, old-fashioned buildings of the Kent and Canterbury Hospital are erected, perhaps with a certain appropriateness, on an old cemetery once belonging to St. Augustine's Priory, a religious foundation which, with its abbey and conventual buildings, was formerly the rival of the cathedral monastery, but gradually fell into decay. A modern missionary college is now established on the site of this priory, and the hospital stands where the old monks were once laid in God's acre. Many melancholy ruins of the old abbey and buildings have been excavated in the garden of the present college. Canterbury is rich in things old and new, and the memories and tangible relics of the old persist harmoniously to be the glory and charm of a later age.

So from Canterbury we came to Dover, and are camped once more by the unvintaged sea. The "old Lord Warden" still stands sentinel by the harbor, and Dover cliffs are still white and still bare their chalky flanks to the dash of the surge. This afternoon we walked from Dover Castle, that crowns the eastern heights, to Shakespeare's Cliff on the west, which still

"O'erhangs and jutties his confounded base,
Swill'd with the wild and wasteful ocean,"

as fearfully as in the days of Lear or Harry of Monmouth. It is good to hear again the crisp rattle of pebbles in the undertow on the shingle, and the long, low roar and boom of breakers against the shore, and to see at night the steady flashing of "the coastwise lights of England." To-morrow we are again aboard and off to foreign fields, like

"Palmeres for to seken straunge strondes
And ferne halwes kowthe in sondry londes."

MEDICUS PEREGRINUS.

FROM THE NETHERLANDS TO HEIDELBERG.

HEIDELBERG, Aug. 15, 1910.

A WEEK of rather strenuous travel and sight-seeing in Belgium and the Netherlands included little of special medical interest. At Bruges, far more memorable for the exquisite, eerie, unearthly beauty and sweetness of the chimes in its gray old belfry, we found, in the gallery of the *Hôtel de Ville*, a curious anatomical painting representing a dissector demonstrating to his class the "shirt-frill" of the mesentery. At the Hague was Rembrandt's much more famous and familiar "School of Anatomy," chiefly of interest not for its anatomic accuracy so much as for the faces of the students, which express as vividly as one still sees them to-day in the dissecting-room or at demonstration the attitudes of different minds towards the subject under study. At the gallery in Antwerp there were more "lessons in anatomy," by Rembrandt and others, of varying merit, all illustrating one aspect of that singular fondness for the gruesome which crops out here and there as a contradictory streak in the artistic temper of the medieval character. One of these in particular, representing a cadaver with the abdomen opened and emptied of viscera, the dome of the diaphragm arching above it, and the calvarium just removed exposing the brain *in situ*, was so realistic as to elicit audible shudders from many who passed before it.

The Belgians are an interesting people, not

nearly as Gallic as one expects to find them, but with a considerable phlegmatic mitigation of temperament which probably represents, racially as well as etymologically, their Flemish descent. Brussels is little more than a miniature Paris, but in the other Belgian cities the national character of the people is well-marked, though it is hard to see why the inhabitants of Flanders should have preserved their racial traits so much better than their neighbors of Picardy. Perhaps the chief reason is that Flemish is still taught in the schools and maintained as a spoken language side by side with French; for its speech is the life of a nation. All the signs in the streets and many in the shops are printed in both languages, and we soon became fairly expert in reading Flemish with the help of the French "trot." From Flemish, as we thus learned it, was an easy transition to Dutch, that own cousin of Anglo-Saxon and half-brother of German. By the time we left Amsterdam we could even make the tram-conductors understand, in their native tongue, where we wanted to go, though the surprisingly prevalent knowledge of English among the people really made such efforts unnecessary. It may be an evidence of culture for an English-speaking person to be able to talk other languages, but after all it is probably better racial policy to make the other people learn English.

At Antwerp, by the way, we had the unexpected pleasure of meeting quite casually, on the street, a Boston physician, well-known to us, who had just arrived from Rotterdam. It is singular how natural such a meeting seems in a foreign city. You turn a corner and there is some one you saw last on Commonwealth Avenue or Boylston Street, and yet his being there gives you as little surprise as any of the benefactions of

Providence that we accept as matter of course. It was good to shake the hand of a friend though, and hear the level, measured speech of a Bostonian again. He gave us some news from home and some counsel about our journey, then said good-bye and passed into the crowd. And when we meet him again in Boston it will seem just as natural and we shall be just as glad as in Antwerp. There is nothing like travel to teach not only the essential brotherhood of all nations, but the strength of the bonds that tie us to our own family and community.

After the Low Countries it is refreshing to get a glimpse once more of woods and mountains as one proceeds up the Rhine valley to the Fatherland. Germany is a country whose past is so full of song and legend, and whose present civilization is so rich in artistic monuments and modern activities, that wherever one goes there is excess of material for study and suggestion for reflection. At Köln we could only marvel in silence at the colossal Dom. Such stupendous works are really too great to be grasped by the ordinary mind. In the old church of St. Ursula we examined with much interest the dadoes and reliefs constructed with bones reputed to be from the skeletons of 11,000 pious virgins martyred by Diocletian near the site of the present building. It was particularly instructive to observe the admirable adaptation of the various bones, especially vertebræ, ribs and ossa innominata, to different types of pattern. Many of the effects produced were strikingly handsome and artistic, notably a herring design of fibulæ and radii, and a large rose of which every petal was a skull. The decorative possibilities of the human skeleton have never been fully worked out, and obviously should be no longer neglected.

From Köln up the Rhine is a journey full of romantic and picturesque interest, and it seems almost too good to be true when you find that all the scenes of the Rheinsaga are really there and that their beauty is even more magical than their names.

“The castl'd crag of Drachenfels
Frowns o'er the wide and winding Rhine”

as gloomily as when Siegfried slew the dragon there, or even in the later days of Lord Byron. Rolandseck still recalls the story of Roland and Roncesvalles; and Stolzenfels bristles upon its proud rock, though not half so imposingly as Sooneck, Falkenburg or Rheinstein a little further up the river. A magnificent thunder-storm swept past us as we went up the gorge of the Rhine, and spread its murky pall behind the Lorelei. There is small wonder at the legend which time has attached to this imposing cliff if one looks at the eddy that whirls treacherously by its base. Beyond “Fair Bingen,” the valley opens out into the sunny Rheingau, surveyed from end to end by the superb national monument of Germania, set “high 'mid rock and wood,” whose colossal figure seems to send a benediction of peace over fertile fields and vineyards towards the south.

After the Rhine, one might fear that all other rivers would fail to charm, but the valley of the Neckar has beauties that almost justify Scheffel's love for it as the most beautiful spot in the world. Heidelberg is of course a name to conjure with, poetically as well as academically, and the combination of attractions which it presents is fairly unequalled. There are towns that have a finer situation; castles that are more exquisitely romantic, notably Conway and Raglan and

Tintagel; rivers that are lovelier; mountains and woods that are more grand and noble; but hardly a spot in any land where so many elements of beauty and association are so harmoniously united. The castle, a rich old ruin of red sandstone, is probably the center that holds all in cohesion, for it attracts your gaze first and last wherever you may be, whether from the valley below, or from the wooded height of the Molkenkur, or from the shady Philosophenweg across the river. Yet from the castle itself, the scene is most fascinating of all, proving doubtless the artistic judgment of its builders, and justifying the somewhat precocious but discriminating exclamation of a preternaturally solemn little German boy who climbed the *gesprengte Turm* with us and on surveying the view from the top said to his father in an awestruck voice, "*Oh Papa, ist das nicht aber geistreich?*"

Three days are all too few to give to the appreciation of such beauties as those of Heidelberg, and at the close of them it seems that we have but just begun to see something of their meaning. Of the University we saw nothing but the exterior, for it is now vacation. The hospitals are interesting and deserving of much more attention than we could give them. We visited the Frauenklinik in particular and were cordially received and shown about by the *Assistent*. Obstetrics thrives in Germany but differs little in the details of its practice from that in other countries. Hebosteotomy and extraperitoneal Cæsarean are the favorite operations here and have largely supplanted the use of forceps in dealing with even moderately contracted pelves, at least in this clinic. It was rather surprising to find that the professor does practically all his private practice at the hospital, where his patients come

to consult him and are received in first and second class waiting-rooms, just like passengers at a railroad station, with corresponding fees. Is this an index of what will result from hospitalization of the people in our own country?

Despite the normal recrudescence of medical enthusiasm on finding ourselves again in a hospital, we have found Heidelberg chiefly memorable, however, for the glory of its natural beauty. Our brief stay here is ended all too soon, and the recollection of this sun-steeped, breeze-swept valley crowned by its woods and by the noble castle will remain one of the happiest of our journey. Oxford has been called "a place to make Americans unhappy," and the pang with which one contrasts it with our own universities is almost akin to sorrow. But to study at Heidelberg should make an American student dangerously happy, for, like the Lotophagi, he would never wish again to return home.

MEDICUS PEREGRINUS.

FROM BAVARIA TO BERLIN.

BERLIN, Aug. 26, 1910.

DESPITE the attraction of famous galleries and of the Passion Play, we left München and Oberammergau behind, like Yarrow, unvisited, and turned our faces from Heidelberg towards Dresden. The journey through Bavaria, broken by longer stops at Würzburg and Nürnberg, was beautiful for its extensive views of neat, cultivated fields and bits of woodland, and for its frequent glimpses of little red-roofed, walled towns perched among low hills or tucked away in tiny valleys, just like toy towns that children might play with. By far the largest and most perfect and most fascinating of these towns was Rothenburg, whose walls and towers and picturesque houses and up-and-down-hill streets are almost enough to drive an artist to distraction with admiration. Its inhabitants, too, seem unspoiled by the popularity which their town so deservedly enjoys, and preserve their quaint old local customs "unmixed with baser matter." Maxfield Parrish must have visited Rothenburg, for there are bits of it in many of his imaginative sketches. Indeed, the town is like the kind one sees in dreams, and a day spent in roaming its streets gives the same satisfying sense of long-awaited fulfillment and realization that one experienced on seeing the pirates in "Peter Pan." Dreams do occasionally come true, after all, even in this world.

At Dresden there was much to see and much to learn, though of an entirely different kind.

The city has an atmosphere of quiet refinement and culture that makes it remind one of Antwerp; and, as the capital of Saxony, it has also many public buildings whose massive beauty give it dignity and grandeur. Moreover, it is one of the greatest art centers of Germany, and its picture-galleries in the huge Zwinger fill one with despair at their extent and richness. Casual visitors, like ourselves, cannot do better than to remember them for their greatest masterpiece, the Sistine Madonna, just as one remembers the Louvre for the Venus of Melos. Singularly enough, with all its wealth of what the Germans call *Kultur-Material*, Dresden has no university, the royal Saxon institution being at Leipzig. Perhaps it is for this very reason, however, that Dresden has attained its eminence; for, since no energy must be expended on the elementary instruction of many students, there is more opportunity for advanced individual work, and the city is, therefore, specially suited for post-graduate study in art or science. This seemed particularly true at the hospitals which we visited, whose spacious quarters and modern equipment give them unequalled possibilities as teaching clinics. The new Königliche Frauenklinik has the finest equipment of any such institution we have seen, and should be a model for hospital builders and administrators in America. Obstetrics and gynecology are, of course, here considered, in theory and in practice, as inseparably constituting a single department of medicine, as, indeed, they are considered throughout Europe. Surgically the obstetricians we met at Dresden seemed more conservative than those elsewhere in Germany. They do hebosteotomy to a considerable extent, but are still willing to employ forceps in moderate degrees of pelvic contraction, and when

Cæsarean section is indicated, usually prefer the direct to the extraperitoneal route. We saw for the first time here the x-ray used in obstetrics. Considerable investigation on the subject has been done at this clinic, and the x-ray is here regarded as of established value in the diagnosis of multiple pregnancy, of tumors and of pelvic disproportions and deformities, though it is employed only near the end of pregnancy for fear of causing abortion. "One considers here the patient first," said the young doctor who escorted us, "and science second," a maxim that might well be more closely observed than it is in some institutions.

From Dresden we came to Berlin, where we are established on the Linden next the American embassy. In comparison with London and Paris, Berlin lacks always the potent fascination of an ancient capital, and at first one is tempted to think it a bit cheap as well as modern. But after one has seen its massive public buildings and *Denkmäler*, and has surveyed the golden magnificence of its numerous palaces, both in the city and at Charlottenburg and Potsdam, and has walked in the Tiergarten from Roland's Brunnen up the marble-statued Sieges Allée to the Pillar of Victory, crowned by its golden Borussia, and thence through the Brandenburger Thor up the Linden to the statue of Frederick the Great, one begins to realize what Berlin represents, and to give it its due place among the imperial cities. In the absence of antiquities, Berlin becomes simplified for sightseers, for in its present form it has not grown up at random, but has been created, and all its principal objects of interest are centrally grouped. The memories of Berlin are chiefly modern, too. Frederick the Great still dominates Potsdam, and, indeed,

his personality invites study, for with his military system, his round table, his narrow sofa on which no one could fall asleep without falling off, his stepless stairs, his windmill, and his flute playing, his character certainly presents amusing and suggestive elements of paranoia. The old margraves and electors of Brandenburg are now little more than shadows, to a stranger at least; but the great tetralogy of men who made the empire and whose personalities are reflected most vividly in modern Berlin are the emperors William I and Friedrich III, the statesman Bismarck and the soldier Von Moltke. That was a stirring drama in which these men were the protagonists forty years ago, and the dominating spirit of Germany to-day seems to be the desire to glorify and perpetuate their achievement. Personally William I must have been a man of charming and democratic simplicity, for his palaces at Babelsberg and at Berlin still show a domestic and quiet taste that make them really homes. Friedrich III seems to have inherited his father's sweetness of character as well as the fortitude with which he bore his painful and premature death. The crown of thorns that surrounds the pedestal of his statue at Charlottenburg fitly suggests the suffering and disappointment that were his. Yet even the emperors are not more highly exalted than Bismarck, the latest of national heroes, whose genius most perfectly typifies that of the German race, and speaks to-day from every city of the empire and in every activity of the nation.

There are in Berlin so many opportunities of profitable study and observation that in a brief stay one can hardly do any of them justice. Unfortunately we reached the city at midsummer, when its life was at low-water mark. Nearly all

the leading medical men are away on vacation, and their juniors at the hospitals are naturally more interested in the opportunities thus given them than in the curiosity of foreign visitors. At the *Königliches Charité Krankenhaus* we were, however, most hospitably entertained, and saw much of interest. Obstetrically the enthusiasm here now is all for vaginal Cæsarean section, which is freely done for a large variety of indications, including eclampsia and rigidity of the cervix. Surgically the most interesting thing, for an American at least, has been to watch the working of stovaine spinal anesthesia, which is used here as a routine in all suitable cases. Operations under this method are certainly not painless, and usually necessitated the administration of a general anesthetic when the patient's complaints became severe. Indeed, without the stolid fortitude of the race, it hardly seems that spinal anesthesia could succeed except for brief and superficial procedures. For general anesthesia a mixture of oxygen, chloroform and ether is usually employed, and administered by means of the Dräger-Roth inhaler. We have had excellent occasion to watch the working of this apparatus, which has much to commend it. The ether and chloroform are aspirated drop by drop from separate chambers, at a rate which can be exactly controlled, by the passage of a current of oxygen into a rubber bag in which the three gases are mixed and from which they are inhaled through a rubber tube and simple mask. This method has the advantages of economy, of constant accuracy and controllability of dosage, and apparently of safety, for no fatalities have yet been reported from its use, and, in all the cases which we saw, the course of the anesthesia was exceedingly smooth. It is customary to begin

the administration with ten drops of chloroform and twenty of ether to the minute, increasing these to thirty and sixty respectively during the early stage of anesthesia, and decreasing to five and fifteen or twenty as soon as the patient is well under. The possibility of thus regulating at will the amount and proportion of each anesthetic, and the constant mixture of both with oxygen, seems to reduce general anesthesia to the simplest terms of safety and scientific accuracy.

It would have been possible for us to do much more in Berlin; but as our vacation nears an end we grow hungry again for England and the country and are leaving to-day for Hamburg, to sail thence for Southampton. We feel that it will be pleasant to be once more where every one talks our native tongue and shares somewhat our attitude towards life. Let this not be construed as a slander on Germany. The Germans are in many respects the most marvelous people on the face of the earth. They are the Romans of the modern world, as the French are its Greeks, and, though a little lacking in spiritual ideals, have preserved unabated the vigor and pristine energy of their ancestral Franks and Goths. They are to-day the most prolific and dynamic of civilized peoples, and bid fair to continue so, for the tramp of the

"Teuton feet that never tire"

shows as yet no sign of ceasing. We have learned much in Germany, of the people, their art, their science and their civilization. But the increase of our knowledge and admiration of the Germans has also served to confirm our respect and love for our own English-speaking people and their children wheresoever dispersed.

MEDICUS PEREGRINUS.

SOUTHAMPTON AND ITS NEIGHBORHOOD.

SOUTHAMPTON, Sept. 2, 1910.

SOUTHAMPTON is a city of many interesting associations, and preserves to this day numerous memorials and suggestions of its past. Along the shore of its beautiful bay still runs Canute Road, by the water where King Canute is reputed to have given his famous rebuke to the flattering courtiers in the days of the Danish dominion over Britain; and the solid old Norman walls and gates and towers, still encircling half of the ancient town, recall the times of a later conquest. On the buttresses of the bar gate used to be the paintings, now removed to a museum for safety, representing the victory, in single combat with the giant Ascupart, of Sir Bevis, the half-legendary hero of Southampton, whose name, doubtless originally Beauvois, still persists in the form Beavis or Bevois as a local surname to be seen on shop-signs and door-plates. Near another of the gates, in Blue Anchor Lane, is preserved the palace of King John, which that monarch is said to have inhabited for a time after the departure of Richard, his lion-hearted brother, from the port of Southampton at the head of his Crusaders to the Holy Land. Southampton saw another royal embarkation, made much more familiar to us by Shakespeare, when in 1415 Henry V set sail here for the invasion of France. Henry stayed in Southampton for some days before his departure, and it was here that

the conspiracy against his life, so graphically narrated in the play, was opportunely brought to light. In the dingy little *Domus Dei*, near the royal quay, is a tablet recording the burial there, after execution, of the three conspirators,—“Richard, Earl of Cambridge; Lord Scrope, of Masham; and Sir Thomas Gray, of Nortumberland.” This building, formerly a hospital or almshouse, has now been used for several centuries as a place of worship by the descendants of Huguenot refugees in Southampton, much as the crypt of Canterbury Cathedral is used by the French silk-weavers of that town.

One other historic embarkation from Southampton has especial interest for us. In the summer of 1620, just two hundred and ninety years ago, the *Speedwell* and the *Mayflower* sailed from this port to found a new nation beyond the seas. The unseaworthiness of the *Speedwell*, which had already brought the Pilgrim Fathers from Delft-haven in Holland, compelled them to stop at Plymouth, whence the *Mayflower* finally sailed alone on Sept. 6 of the same year. Southampton, however, was their original port of departure, and it seems appropriate that the beginnings of our own New England should be so linked with this ancient and historic maritime town. One is tempted to indulge in much speculation and reverie, standing at sundown on a height overlooking Southampton Water, and in imagination to contrast those frail craft of momentous destiny with the huge American liners that now come wearing up the Solent, back from the great Republic of the West.

The interest and associations of Southampton, however, are not all within its walls. On the southeast shore of the harbor, secluded in a quiet wood, is Netley Abbey, whose ruin, like those of

Tintern and Fountains, is far more beautiful than its original perfection could ever have been. Such a ruin is infinitely stimulative to the imagination, for it not only gives boundless opportunity to reconstruct the past, but illustrates that shattered aspiration may be even greater than splendid achievement. Far more prosaic than the abbey, and doubtless far more useful than it was, is the Netley Military Hospital, which stretches its fine brick front conspicuously along the waterside. It has accommodation for over a thousand patients and is said to afford unusual opportunity for the study of tropical and cutaneous diseases. We did not visit it however; as vacation shortens, abbeys grow more attractive than hospitals.

Over against Southampton Harbor, which it protects, as a gigantic breakwater, from the rage of the "merry channel chops," lies the Isle of Wight, sometimes called the island of centenarians, on account of the reputed salubrity of its climate. One would rather expect the climate to be particularly bad, yet it does not seem to be so, and the island is much resorted to by invalids, especially by patients with phthisis and other diseases of the lungs. Along the south coast of Wight, just west of Ventnor, is the Royal Victorian Hospital for Tuberculosis, consisting of a series of larger and smaller buildings extending for over a quarter of a mile along the shore. There were other things in the island, however, that interested us more and we spent a day very pleasantly coaching and traveling through its picturesque territory. Just beyond the Victorian Hospital is a ravine which rejoices in the magnificently swashbuckling name of Blackgang Chine. Visions of pirates and smugglers rose at once in our minds, but we were assured that the abyss

harbors nothing more formidable than lizards. At the western extremity of the island are the so-called "Needles," two detached rather stumpy masses of chalk rock projecting above the waters of Alum Bay. They are very beautiful in the dazzling sunshine, but do not really look like needles at all, unless like the point of a cambric needle seen through a microscope. Carisbrooke Castle, near Newport, was interesting for its association with Charles I, who was imprisoned here before his execution. One is also shown here the old well, conveniently placed so as to receive all the drainage from the castle, but whose waters, once doubtless deemed delicious, are now considerably labelled "not fit to drink." Let our improvement in some of the details of life console us for the loss of its more romantic elements.

Our last day at Southampton was spent in an excursion to Chichester, a quaint old town in "sweet Sussex by the sea." It is of Roman origin, built along two main streets intersecting at right angles. In the square at this point of anastomosis is the "mercat-cross," like a crown built of stone, indicating the site of the old market place, and large enough to afford shelter to a number of marketers in inclement weather. The cathedral is hard by, surrounded by a modest close, in which stands its unique detached bell-tower. Within the church are many monuments, one of them to the poet Collins, who was born and who died in Chichester. One of the most interesting tablets was that recording the life and virtues of "John Arundel, M.D., Fellow of Exeter Coll., Oxon., and in 1420 Proctor of the University. He afterwards took his doctor's degree in Physick." He also took orders and held many ecclesiastical offices, finally becoming

Bishop of Chichester. "He was Chaplain and first Physician to King Henry VI, beings allways in great favour with that Prince." In 1459 he was promoted to the see of Chichester, and, concludes the inscription, "he satt heere about 19 yeares, and dying ye 18th of October, 1477, was Buried under this Great Tomb." After more than four hundred years, let us hope that our brother physician, who healed souls as well as bodies, sleeps well in his great tomb, and that after our brief labors we may find as pleasant a resting-place as his, surrounded still by the successors of those to whom he ministered.

Not far from the cathedral is the Hospital of Saint Mary, another one of the many almshouses surviving out of the Middle Ages. This particular institution, still persisting on its ancient foundation, accommodates under its roof eight old women, each in a separate cubicle with sitting room. Each of these poor beneficiaries receives, besides her board and lodging, a dole of tenpence a week, and in addition "ten shillings every other year in lieu of a new gown." It would seem that most of the fallacious vanities of life must be abrogated under such a regimen. After all, the essentials of existence, like those of happiness, can be comprised within a very small compass.

Perhaps it is hardly fair to put down all our pleasures of the past few days to the credit of Southampton. Nevertheless, the charm of the town seems to extend over all the country round about; and we shall not soon forget our stay here since the welcome night when we put in as returning pilgrims, and heard our own tongue spoken once more, and set foot again on the homelike shores of merry England.

MEDICUS PEREGRINUS.

THE LAND OF ARTHURIAN ROMANCE.

GLOUCESTER, Sept. 12, 1910.

OUR past ten days of travel have taken us through the regions particularly associated with Arthurian romance, and it has been pleasant in connection with them to recall the half-mythical, half-historic legends of the British king and his knights which have formed the material of our greatest racial and national epic.

From Southampton one may go up the River Itchen, memorable for its later piscatorial association with Sir Izaak Walton, to Winchester, supposed to be the "many-tower'd Camelot" of Arthur. There is little in the busy town to-day, however, to recall the "blameless king" and his vanished state. Indeed, modern Winchester has much more obvious reminiscences of another monarch, Alfred the Great, who made it the capital of his kingdom of Wessex, and issued thence his four famous Anglo-Saxon translations. His heroic statue, erected at the millennium of his death, dominates the market-place and principal street, and sends westward over land and sea the benediction of his uplifted sword-hilt. Even after his time, during the ascendancy of the Mercian kings, the city retained much of its political importance and was a headquarters for William the Conqueror and his Norman successors until the seat of government was finally transferred to "the place which now is this world's hugest." Of all this royal magnificence there is now scarcely any trace, and castle and

palace have been outlasted by the grim, massive cathedral, where, among others of note, the good Sir Izaak lies buried, and by the famous Winchester School, founded by Bishop William of Wykeham, whose motto, "Maners makyth Man," deserves to rank with the more practical apophthegm of another ecclesiastic of his time, "Serve God and be Chearefull." Both might be pondered and applied to advantage in our own day. Few men have succeeded as well as Wykeham in impressing their own personality on institutions which they have shaped, and to this day the graduates of the Winchester School and of its scion, New College, Oxford, form throughout England a clan of Wykehamites whose loyalty to each other and allegiance to their school and the principles of its founder are remarkable. A visit to the pleasant, venerable buildings of this ancient school is well rewarded, not only by the interest of observing its preservation of old usages and customs, such as the serving of food on wooden trenchers, but by the inspiration of the noble inscriptions under its portals to the memory of alumni who have sacrificed life or fortune in the honorable service of their country.

Among so much of medieval interest there is small wonder that everything but the memory of Arthur has perished out of Winchester, and one must have recourse to imagination to restore the Camelot of old. In this instance the trick is not so difficult, and for once the fancy cheats "as well as she is famed to do." Close by the river stand still the ruins of Wolvesey Palace, a Norman structure of the twelfth century, and if one walk out of the town and down the stream at sunset, when the light blurs the outlines and glorifies the semblance of everything it touches, one can transform their fragments at will into

the stately towers and gates of King Arthur's fabled castle. As we went one afternoon on such an excursion, we met, in the person of a small urchin, an enthusiastic modern disciple of the "compleat angler" who later gave new fame to these waters. Stopping by the bank to inquire of his success, we asked him what he was fishing for; to which he solemnly replied, "Trite," a plural which was novel but might perhaps be justified on the analogy of "kine" and "mice." As we came back, after this episode, the mist-wreaths were already rising from the river and twining among the reeds along the shore, and in the evening twilight it was not hard to see once more the lovely Lady of Shalott drifting down out of the dusk on her barge to the jasper gates of Camelot.

Not many miles from Winchester is Salisbury, a rather prim and quiet town with a beautiful "mercat-cross," in the shape of a stone crown, like that of Chichester, and an elegant cathedral that suns itself in a broad, open green, surrounded but not hidden by noble elms and beeches. In this cathedral, near the chancel-rail, is buried

"The subject of all verse,
Sidney's sister, Pembroke's mother,"

the Countess of Pembroke, for whom the "Arcadia" was written by her gallant and chivalrous brother, Sir Philip Sidney, the knight-errant of English poets. By a curious coincidence, we learned that a Boston physician had been married in this church five years ago, and found the record, with his name, on the register. After all, personal associations, whether past or present, are the strongest links that draw us to old places as well as to old friends.

Even more interesting than Salisbury, because

unique in kind, is Stonehenge, the most impressive and ancient human monument in England. One visits it from Amesbury, a quiet, sunny little village, preserving, in slightly altered form, the name of Almesbury Abbey, whither the guilty Queen Guinevere fled after the discovery of her treason with Launcelot, and where, after Arthur's last battle, she "let make herself a nun." Of the old nunnery no trace remains, but the present small abbey church doubtless stands upon its site, and seems to harbor some measure of the peace to which she passed.

Stonehenge itself is about two miles from Amesbury, standing solitary and inexplicable in the open rolling country of Salisbury Plains. As you first catch sight of it from a distance, it looks almost insignificant; but as you approach, it acquires dignity; and when you stand close to its enormous shafts, you begin to appreciate its archaic grandeur. Dozens of theories have been propounded by antiquarians and geologists to account for its existence. The probability seems to be that at least some of the gigantic monoliths of which it is built were brought by glaciers during the Ice Age from Ireland, and subsequently left on the alluvial plains of southern England. Here they were found by the Phenicians at the time when this ancient race, near the dawn of history, apparently roamed and settled sporadically over a large part of Europe. With them the Phenicians constructed Stonehenge as a temple of sun worship, in the form of two concentric circles enclosing two ellipses. At the westerly focus of the inner ellipse was an altar, upon which, on the longest day of the year, the rising sun casts the shadow of a single stone, now called the Friar's Heel, set up some distance to the eastward. Midway between this

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were probably brought two hundred thousand years ago by glaciers from the strata in which they were formed in æons past, one begins to realize how small a moment the whole of human history is in the space of measurable time. Such a contrast reduces the greatest individual achievement to nothing, and makes Stonehenge the peer of the Sphinx and the Pyramids and the image of Ozymandias.

From Stonehenge it was a long journey, and a much longer lapse in thought, to Camelford, the little hilly town in Cornwall near which is reputed to have been fought Arthur's "last, great battle in the West." Of course, there is nothing now but tradition to tell the tale, and we had not even time to seek out Dozmare Pool, locally regarded as the "murmuring mere" into which Sir Bedivere cast the brand Excalibur. For us Camelford was only a stopping-place from which to continue our way by coach to Tintagel.

Tintagel, with which Tennyson has familiarized us as "dark Dundagil by the Cornish Sea," remains not only one of the most romantically beautiful spots in England, but one of the most tangible memorials of a shadowy and legendary past. On a huge, rugged promontory thrust out into the roaring ocean from a shore of dark, bristling, slaty reefs, stand the ruins of a castle of unknown date, which, though doubtless not the original structure, probably occupies the site of the ancient castle of the kings of Cornwall. The ceaseless action of storm and waves has battered down the ramparts and carried a large part of the once extensive fortress into the sea; but the round keep on the shoreward side still commands the dark, narrow ravine that leads down to it from the land. The castle should seem impregnable, and is said to have been

entered never by force and only once by fraud, when Uther Pendragon made his way in by representing himself as Gorlois, the King of Cornwall, whom he had just slain in battle. In this castle was born Arthur, the child of Uther and of Igraine, the Cornish queen, and from here he is fabled to have been taken at night by Merlin, who entrusted him secretly to Sir Ector to be nurtured and educated until it should be time for him to claim his kingdom. At the base of the cliff on which the castle stands is a wicked cave, tunnelling completely through the promontory, slippery with seaweed and dripping with ooze at low tide, and at high tide filled with thundering surf and dashing bowlders; and this is still known as Merlin's Cave, for here the great wizard lurked till he could obtain the child. That romantic episodes should have occurred in such an environment seems inevitable, and from the prosaic certainties of to-day it is fascinating to speculate back into the haze of a bygone age and conjecture what may have been the basis of actual fact underlying so much that is beautiful in song and story.

In later time, after King Arthur had come to his own and had established the Round Table, Tintagel Castle remained the seat of the kings of Cornwall, and became the scene of the more tragic romance of Iseult, the wife of King Mark, and Tristram of Lyonesse. That story, unfortunately more familiar to most of us in the foreign garb of the opera "*Tristan und Isolde*," is still one of the most perfect types in literature, and its association with Tintagel makes the old castle doubly interesting. As one stands on the headland looking across towards the Irish shore, one can see in any passing boat the silken-sailed vessel bearing Tristram and Iseult,

upon whom the sea has worked its immemorial magic.

From Tintagel our road lay along the coast, through Cornish and Devon villages of the greatest charm and beauty, but without particular interest of association. At Taunton, the county-town of Somersetshire, we came, singularly enough, upon two totally diverse objects of professional interest. In the local museum here is preserved the trunk of a young ash tree cleft for the cure of congenital hernia. There appears to have been a rather widely diffused superstition in England that if a child with a hernia be passed thrice through a sapling thus cleft, and if the tree subsequently grow together again, the child will be healed of his infirmity. In this instance, the cure must have failed, or else some enterprising folk-lore student secured the specimen too early and aborted the result, for the split in the trunk still remains widely enough separated to admit the passage of a full-term baby through it with ease. We were credibly informed that this practise has been followed in all good faith by inhabitants of the vicinity until within very recent years. It is quite conceivable that the percentage of spontaneous cures of infantile umbilical herniæ, and of hydrocele incurring the still customary parental diagnosis of hernia, was sufficiently great to establish and maintain the reputation of this procedure, which, like other primitive therapeutic measures, apparently had its origin in the idea of transferring the ailment in similar form to some creature or thing, in which it might become cured by natural process. Our other object of professional interest at Taunton was a sign-board on the highway advertising the "Harvard Teeth Institute." Apparently the merits

of American dentistry and of at least one American school are not unknown in Somerset, or their possible commercial value unappreciated.

A forenoon's journey from Taunton took us once more out of the mercantile atmosphere of a busy market-town back to the dreamland of medieval romance, to Glastonbury, the Avalon of Arthurian tradition. Geologic and climatic change, as well as the growth of so-called civilization, have altered it somewhat from

"The island vale of Avalon,
Where falls not hail, or rain, or any snow,
Nor ever wind blows loudly";

yet it is still as lovely a spot as is to be found in all of merry England, and lies

"Deep-meadow'd, happy, fair, with orchard-lawns,
And bowery hollows, crown'd with summer seas."

It was always hard to understand how Glastonbury could ever have been an island, but the solution becomes easy at a glance when one ascends the Tor and looks down on the great alluvial plain that encircles the four hills,—Tor, Chalice, Edmund's and Wearyall,—between which lies the little town. In Arthur's time this plain was all under water, and Avalon with its hills formed a sheltered "island-vale," to which the king was brought "to heal him of his grievous wound." To this island also was reputed to have come some centuries earlier Joseph of Arimathea, bringing with him as a supremely precious sacred relic the Holy Grail. His descendants were supposed to have built on Chalice Hill the Grail Castle and to have dwelt there as guardians of the Grail and kings of the surrounding country, until the holy vessel was lost through the misdemeanor of King Pelles, about the time when Arthur came to his king-

dom. Hence the quest of the Grail became one of the favorite exploits essayed by knights of the Round Table; and hence, after his last battle, Arthur was appropriately taken to Avalon. Of his reputed grave there, and of Queen Guinevere, and of the mythical castle, there is, of course, no trace to be found. In later days, when the waters had receded, and Glastonbury had ceased to be an island, a monastery was established there, which in time grew into the most splendid mitered abbey of England. Here St. Dunstan lived and vanquished the devil in summary fashion, and hither came pilgrims "from every shires ende" to visit the famous shrine. Wearyall Hill still preserves the memory of their hardships, when from its summit they first caught sight of their goal and began the last stage of the journey. Yet apparently the creature comforts of wayfarers were not wholly neglected even in those days, for we lodged in the town at the "Pilgrimes Inn," built in 1425 for the accommodation of palmers coming to the shrine, and if they were as well housed and fed there as we, their lot could not have been a very hard one.

Of the vast church and accessory buildings of Glastonbury Abbey, only a few fragments are still preserved, but they are enough to give a conception of its former lofty magnificence and beauty. Unfortunately, human progress seems inevitably to involve the sacrifice, not only of human lives, but of many of the finest fruits of precedent human genius. Henry the Eighth, that uxorious and iconoclastic monarch, to whom the world owes so much, yet who ruthlessly destroyed so many of its noblest monuments, suppressed the abbey during his wholesale measures in the sixteenth century, and hanged its last abbot on Glastonbury Tor, saying that he would

make a scarecrow of him to frighten his fellow-prelates. After this, the days of the abbey were numbered, and the unthinking and unfeeling generations completed the work of plunder by pillaging the ruined walls of rare tracery and exquisite carving to be used for macadamizing the roads of the neighborhood.

After so distinguished a history and so calamitous a visitation, Glastonbury and its abbey remain, however, rich in stirring memories and associations. Whether Arthur were really ever buried here or not, his spirit has become the *genius loci*, as that of Friedrich Barbarossa has of the Hartz Mountains. And if ever one should wish to appreciate the significance of Arthurian romance, or look for the return of Arthur and his time to this earth, it could be in no other spot than in this isle of Avalon.

It is singular that the translation and apotheosis of Arthur should have occurred so near the site of one of the earliest and perhaps the most authentically historic of the episodes in his career. Less than thirty miles from Glastonbury, rising greenly wooded behind the city of Bath, is Bath Mountain, where was fought the celebrated battle of Mons Badonis, mentioned by Nennius as the last of a series of engagements which marked the victory of British resistance to Roman rule and ended in the establishment of King Arthur upon his throne of sovereignty among a number of petty British chieftains. The modern city of Bath, however, has many more reminiscences of the Georgian than of the Arthurian era, and the spirit of Beau Nash still pervades its abbey and its pump-room, despite the Roman excavations that reveal the luxury of earlier conquerors. The waters still bubble up hot and copious as they were doing fifteen cen-

turies ago, at the rate of half a million gallons a day; and, whether their efficacy be due to chalybeate virtue or to a radio-activity unsuspected in the days of the Cæsars, their healing properties are still eagerly sought by those who are not sick enough to be abed nor poor enough to be obliged to work for a living. Doubtless, as the Pindaric quotation over the door of the pump-room says, "Water is best," but one need hardly come to Bath to learn that truism.

One other place of Arthurian association deserves mention in the chronicle of our journey, and that is "old Caerleon upon Usk." Here once was Arthur's summer palace, and here still is preserved the local memory of his presence. Caerleon to-day is a sleepy little hamlet, dozing in the leafy valley of the Usk that rivals the more celebrated Wye in beauty. It has but a few hundred inhabitants, and contains a single, diminutive inn, with sanded floors and deal tables and walls adorned with scripture texts and the warning that "swearing is strictly prohibited." There seems much doubt whether the circumvallated mound, still pointed out in a meadow as King Arthur's castle, were ever a castle or had anything to do with Arthur. Be that as it may, the name is still there to conjure with, and in romance a name is everything. Caerleon upon Usk is a phrase to recall all the buoyancy of boyhood, and the sunny beginning of adventures "once upon a time." If ever there were an enchanted palace, it should be here, and there is no better place than here to take farewell of King Arthur, the secret of whose immortality is that he embodies as an ideal the eternal youth and hope of man.

MEDICUS PEREGRINUS.

THE BORDERLAND OF WALES.

LIVERPOOL, Sept. 19, 1910.

THE country on the borderland between England and Wales seems to have been particularly associated with episodes in the civil wars of British history. The reason for this is hardly obvious unless it be that the fastnesses of the Welsh mountains have always afforded good refuge for defeated insurrectionists, for non-conforming dissenters or for deposed sovereigns, and a point of vantage for pretenders, revolutionists and intriguers of every description. In any event, many of the important battles of the Revolution (an Englishman knows only that of 1688), and of the Wars of the Roses, were fought in these parts, and the castles of the region suffered recurrent sieges by Royalists and Parliamentarians until all of them were ruined and many of them swept out of existence in the process. If Henry VIII must be blamed for the pillaging of all the abbeys, priories and shrines in England, Cromwell and his Roundheads have as much to answer for in their destruction of ancient fortresses and in the vandalism with which they visited cathedrals and churches throughout the land.

The first of these names connected with the English civil wars is Tewkesbury, a town of very different character and connotation from its American namesake, situated not far above Gloucester on the river Severn. One can go to it by boat, and the sail is very pleasant, even

though one fail, as we did, to see the nymph Sabrina, who must have been driven under cover by the rain of the preceding night. One lands at a picturesque ford called the Lower Lode, and walks thence to the town across the "bloody meadow of Tewkesbury." Here in 1471 was fought the decisive battle in which Edward IV defeated the Lancastrian forces and established the house of York on the English throne. In the brooding quiet of the spacious old abbey across the fields is buried Edward, Prince of Wales, killed in this battle, and also the Duke of Clarence, brother to Edward IV, who later met the ignominious, though even more celebrated death, of being "drowned in a butt of malmsey," a fate and mode of demise which one would have thought best suited to Sir John Falstaff. Sir John apparently knew Tewkesbury, too, for he averred of Poins's wit that it was "as thick as Tewkesbury mustard." Unhappily he died before the days of the battle, when Prince Hal as king "ran bad humours on the knight"; had he lived to engage in that memorable fight, the issue of the conflict might have been different. We could not discover, in the pleasant little tea-garden where we lunched, that Tewkesbury mustard was thicker than that of any other locality. Nor would one dream, in walking over them, that the smooth, green meadows which slope gently from the town and abbey to "Severn's reedy marge" were ever wet with the blood of those whom "false, fleeting, perjur'd Clarence slew on the field at Tewkesbury."

Another name intimately associated with English history is that of Gloucester, now a busy but agreeable port at the mouth of the Severn. There was no battle here, but in 1643 the town

held out successfully against the Royalists. This exhibition of "malignity" was not forgotten by the Stuart adherents, and, after the Restoration, the fortifications of Gloucester were utterly destroyed. There is, therefore, little of interest now in the city but its splendid cathedral. Here is buried Edward II, the first Prince of Wales, son of Edward Longshanks, the great castle-builder. Here, too, is a monument to Edward Jenner, the discoverer of vaccination, who was born in the neighboring town of Berkeley. It is a gratification to professional pride, as well as to better sentiments, to find him thus in the company of bishops and kings.

Not far from Gloucester, on the marches of South Wales, is Chepstow, whose extensive castle once guarded the mouth of the Wye and the old Roman road that still serves as a highway of travel across the river into the country beyond. This castle was held for the king in the days of Cromwell, and later served for twenty years as a prison for the regicide Martin. During those years of solitude he composed his epitaph, which may now be read over his grave in the Chepstow church. With rude but impressive nobility, these lines express his justification for his action and, like his dungeon in the ivy-grown, rambling old ruin, "appeal from tyranny to God."

At Monmouth, a short distance up the winding Wye, one comes again to associations of an earlier date. Here in 1388 was born Prince Hal, Falstaff's merry royal comrade, the hero of our finest historical drama, who later, as Henry V, conquered France and set a French princess beside him on the throne of England. The room where he was born is still shown among the scanty fragments of Monmouth Castle, and his statue, much worn and obliterated by time and

weather, occupies a prominent place on the front of the town hall. Another character indelibly associated with Monmouth is that of Geoffrey, the imaginative chronicler of the twelfth century, whose romancing records, though so full of fable, constitute our most valuable information of what the history of his time ought to have been. The river Monnow, which here flows into the Wye and gives the town its name, is spanned by a bridge that resembles those at Bruges and looks as if it had been transported out of medieval Europe. Gray called Monmouth "the delight of the eye and the very seat of pleasure," and indeed it is to-day perhaps the most picturesque of English border-towns and a center for many fascinating excursions. One of the most charming of these is to Raglan, on the whole the most perfect and beautiful of ruined English castles. Like Chepstow, it was a seat of the Earls of Worcester, later Dukes of Beaufort, and, like Chepstow, was held by them for Charles I. In fact, Raglan was the last Royalist stronghold to be captured by the Parliamentary troops, who wreaked their vengeance by undermining and blowing up its beautiful moated Cæsar tower, which as a result now resembles the *gesprengte Turm* at Heidelberg. Partly perhaps in remembrance of its loyalty, partly no doubt on account of its charm and beauty of environment, it was visited after the Restoration by Charles II, whose apartments, fronting on the lovely Fountain Court, constitute the finest part of the ruin. If one could visit but two castles in England, Raglan should surely be one of them.

A little further up the Wye from Monmouth is Ross, chiefly familiar to us from Pope's verses to John Kyrle, the "Man of Ross," who became an eminent philanthropist on five hundred pounds

a year. Judging by professional incomes of the present day, this should not have been so difficult a task, especially since money in those times, like George Washington's dollar, "went farther than it does nowadays." Whatever the benefit of Kyrle's philanthropy may have been to his contemporaries, he is chiefly blessed by the present generation for having planted two centuries ago the elm trees whose vigorous maturity now shades the wide churchyard of Ross. Among many quaint memorials in this quiet "God's acre" is one in Latin on the tomb of Richard Panter, who departed this life in 1733, which, in spite of its uncanonical and inaccurate meter and rhyme, seems to have a touch of satirical dignity and distinction that makes it almost classic:

" Animula vagula blandula,
 Hospes comesque corporis,
 Quae nunc abibis in loca
 Pallidula rigida nudula,
 Nec ut soles dabis jocos."

It is to be hoped that these lines were intended not to cast aspersions on the deceased Panter for unseemly habitual merriment, but merely as a mournful comment on his customary cheerful Christian temper. Not far from this monument is another, a simple cross erected in 1637 to mark the burial in a common grave of 315 victims of the plague, and bearing in addition the pathetically fervent inscription, "Libera nos, Domine!" It is hard for us to realize now the poignant terror of these ancient epidemic scourges. One of the interesting preventive measures taken in the seventeenth and eighteenth centuries against the "pestilence that walketh in darkness" was the custom of whitewashing the interiors of churches throughout. As a procedure of anti-

septic cleanliness this may have had some slight efficacy, but incidentally it rendered the much more valuable service of preserving to posterity a wealth of carving and frescoes which might hardly have escaped the destructive energies of the Georgian era but for the successive layers of obscuring whitewash, the removal of which has afforded occupation for the zeal of a more artistic modern generation of restorers. The church at Ross affords admirable example of beauties thus long concealed and now once more brought to light. Of the town itself there is little to be said except that it is old and somewhat shabby and evidently having a rather hard time trying to live up to its reputation and environment. Its situation is almost ideal—on the concave bank of one of the numerous bends or horseshoes from which the “devious Vaga” derives its name. On the opposite, convex bank or tongue, which broadens out into a richly green, low-lying, fertile meadow, stand the ruins of Wilton Castle, insignificant in itself, but interesting to us as having once belonged to Thomas Guy, the founder of Guy’s Hospital in London, to which institution he bequeathed the property. The castle has now passed into other hands, and its walls, overgrown with reddening woodbine, form the chief attraction of a handsome private estate. Just beyond the castle, the Wye is crossed by Wilton Bridge, on which is a rather unusual four-way vertical sundial, with the admonishing motto:

“Esteem thy precious time
Which pass so swift away,
Prepare then for Eternitie,
And do not make delay.”

Doubtless in a less critical age this laudable injunction lost none of its force from the gram-

matical license of its second or the anticlimax of its fourth line.

Still further up the Wye is Hereford, a very pleasant and prosperous city, and chief town of the county of the same name, "which for wheat, wool, and water yieldeth to no shire in England." It also manufactures much cider and a seductive drink called perry, which we did not sample. There is a fine cathedral at Hereford, and several interesting old churches, and in the outskirts of the town a hospital or almshouse for old soldiers and other pensioners, founded in 1614 on the site of a former priory of Black Friars. In the garden are still some ruins of this priory, among them a well-preserved preaching-cross, from which the monks used to hold open-air evangelistic services, somewhat in the fashion of the Salvation Army of to-day. In one of the suburbs on the opposite side of the town is the so-called White Cross, erected in 1349 to commemorate the staying of the Black Death of that year, another of the medieval pestilences which seem to have swept this region with particular severity. Of the later civil wars Hereford, though always loyal to the Crown, seems to retain scarcely any trace. It is associated with the Stuarts in another way, however, as the birthplace of Nell Gwynne, the famous beauty and actress, and favorite of Charles II. In an obscure lane, and on the very wall of the bishop's garden, too, is a brass tablet marking the site of the cottage where she was born, and recording her as the "founder of Chelsea Hospital and mother of first Duke of St. Albans." This somewhat tactless addition cannot help reminding one of the story how one day, when Charles had refused her request to ennoble their child, she promptly suspended the infant by the heels over the balus-

trade of the balcony on which they were sitting, and remarked, "Over he goes if you don't provide for him." "No," said Charles, "don't hurt the Duke of St. Albans." And so the royal peerage was established. Perhaps this episode was quite in accord with the character of the monarch "who never said a foolish thing and never did a wise one." At any rate, one cannot help thinking more leniently of him for his dying injunction to "take care of poor Nell." She is buried at St. Martin's-in-the-Fields, in London, among many with better reputations and less virtue than herself.

At Hereford we left the valley of the Wye and struck across country to Worcester. This journey took us through Malvern, famous as a health-resort on account of its mineral springs, but more interesting as the site of the monastery where William Langland wrote his "Vision of Piers Plowman." Unfortunately it was a dismal, rainy day when we traversed the scene, very different from the "May morwenynge on Malverne hilles" on which the tale begins. Beyond the hills one comes again to the Severn valley and to Worcester, chiefly famous for the manufacture of the somewhat miscellaneous staples: porcelain, gloves and Worcestershire sauce. There is an architecturally interesting cathedral here, in which, by the way, we noted the epitaph of one Richard Solly, "who was seized with an inflammation of the intestines which in five days terminated his life," evidently a case of fulminating perforative appendicitis with general peritonitis. Worcester also has its association with the Stuarts, to whom it was always loyal. There is still standing in excellent preservation a fine old Elizabethan mansion, called the Commandery, from its earlier association as a hospice or

infirmary of the Knights Templar, in which Charles I stayed on a visit to the town. This same house Charles II later made his headquarters for a time in 1651; here he spent the night before the battle of Worcester; and from an upper window witnessed the defeat of his troops in that memorable engagement. From that same window one can still overlook the battlefield, and one is shown the very trap-door through which the young monarch made his precipitate escape on the approach of Cromwell. There is enough old oak carving and furniture in this house to drive an antiquarian into a frenzy of admiration.

The journey from Worcester to Shrewsbury takes one back again to Plantagenet times, for here in 1403 Henry Bolingbroke, father of Prince Harry of Monmouth, won his great victory over the Earl of Northumberland. It was this battle in which Harry Hotspur was killed and in which Falstaff fought his "long hour by Shrewsbury clock." The abbey church looks much the same as it must have on that occasion, though its clock is modern, and probably a better timepiece. The town itself, whose name is happily mitigated from that of Scrobbesbyrig, in which it used to rejoice in Saxon times, contains a number of old houses, in one of which Henry Tudor, Earl of Richmond, is said to have passed the night before the battle of Bosworth, which, in 1485, terminated the Wars of the Roses and made him Henry VII of England. There is also in Shrewsbury the ancient and celebrated grammar school which in different ages has harbored two such diverse geniuses as Sir Philip Sidney and Charles Darwin.

Last and in some respects most interesting of these border-towns is Chester, which ever since Roman days has been an outpost at the Welsh

frontier on the north, as Chepstow is at the south. As capital of Cheshire one associates it chiefly with cats and cheese; the latter is delectable, but the former, though numerous and amiable, seem to have lost their traditional grin. Perhaps the most distinctive characteristics of Chester, which give so many Americans their first impression of England, are its old frame houses, with their arcades and projecting upper stories, and its town-walls, the only ones in the country that remain complete, though perhaps not so interesting as those of York or of Conway. One can make the entire circuit of the city walking on top of them, and see much of interest in the journey. From the Phoenix Tower, at one angle of the walls, Charles I watched the defeat of his army at Rowton Moor, on Sept. 24, 1645, and the tower now contains a museum of relics associated with him and with the battle. The town itself held out for the king for another year, but finally surrendered to the Parliamentary besiegers. Chester had a former reputation for endurance in a losing cause, for at the time of the Conquest it was the last English city to yield to William the Norman. A little further along the walls, near the river Dee, is the Water Tower, once washed by the tide and used as a mooring-place for ships, now left high and dry by the deposit of silt and the damming of the river higher up. Near this Water Tower have been discovered a number of stumps of columns from some Roman structure on this site, which resemble gigantic mushrooms as one looks down on them from above. Still further on, by the Bridgegate, one obtains splendid views of town and river, and can go down thence to the ruins of St. John's Priory, whose crumbling red sandstone, sunk deep in ivy, makes a picture for the eye and the

imagination as well. Chester Cathedral, too, is a study for the artist as well as a first lesson to the beginner in ecclesiastical architecture. Among its many monuments to soldiers, one wonders which bears the name remembered by the

"Widow in sleepy Chester,
Who mourns for her only son";

but Subadar Prag Tewarri is not there to tell. Several Cheshire regiments were sent to America in the "good old colony days," and the names of Louisburg and Quebec are conspicuous on their records and standards. Some of these tattered old flags were carried at Bunker Hill, but the name of that battle is not mentioned. Among so many warriors, it is pleasant to find the peaceful grave of Ralph Higden, the monk who is supposed to have written "Everyman." It is to be hoped that the "Dethe" which summoned him proved less terrible than the grinning skeleton of the old miracle.

From Chester to Liverpool is like a step from the Middle Ages back to the familiar atmosphere of our own day and generation. The busy streets, the smoke-grimed buildings, the sharp contrasts of wealth and poverty, all bear evidence of the evils of our civilization as well as of the good that has grown out of them. As a city, modern Liverpool is dominated by the memory of Gladstone, whose statue before St. George's Hall, like that in the Strand in London, recalls vividly the bristling, indomitable figure that so long stood at the head of the greatest nation in Europe. If popular government has done nothing else, it has at least developed great democratic leaders from the days of Oliver Cromwell to our own.

The return to Liverpool marks the end of our happy and profitable holiday, and recalls pro-

fessional duties and interests. We sail to-morrow, and shall soon "leave old England on our lee." In our brief time at Liverpool we have been able to make only a hurried inspection of some of the medical institutions in the city, chiefly those connected with Liverpool University, whose buildings form a huge group of structures, not so extensive as the immense Imperial Institute at London, but reminding one of it, nevertheless. There is a large general hospital, a dental hospital, a lying-in hospital, a skin hospital, a school of hygiene and splendid laboratories, among them notably those of the School of Tropical Medicine. It is impressive to visit such an institution and consider the battle it is fighting for the sordid dwellers in the slums which surround it and for all mankind as well. The spirit of that conflict speaks eloquently in the tablet of dedication on one of the buildings:

"To the Glory of God, in the knowledge of Whom are the steps of human progress, and to the memory of William and Catharine Johnston, now beyond the shadows of time in life eternal, one of their sons erected these laboratories for the search after the mystery of life in health and sickness; and for the alleviation and prevention of suffering."

Such words are a noble reminder of the duties of a profession whose inspiration is the same wherever there is human welfare to be served. One feels the readier to return and labor humbly at home for having met and known some of those who are forwarding the same great cause beyond the seas.

MEDICUS PEREGRINUS.

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